S	CHEDULE E)		PAGE 1 FOR SE OI	OF 12 F FORM 24/48
	NAME OF COMMITTE (In Full) FEC IDENTIFICATION NUMBER ▼			ION NUMBER ▼
٧	Vorkers' Voice			
			C C00484287	
С	neck If 24-hour report X 48-hour report New report Amends repo	ort filed on	M / D D /	Y
	Full Name (Last, First, Middle Initial) of Payee	Date		
	Mosaic			
			09 26	2012
	Mailing Address 4801 Viewpoint Place			
		Amoun	nt 	
	City State Zip Code Cheverly MD 20781			45.00
			ction ID : D453739	
	Purpose of Expenditure Fliers Category/ 004	Office Sough		State: OH
	Type 004		Senate	District:
	Name of Federal Candidate Supported or Opposed by Expenditure:		President	
	JOSH MANDEL	Check One:	Support	Oppose
	Calendar Year-To-Date Per Election	Disbursemen	nt For: Primary	✓ General
	for Office Sought	2012	her (specify)	
	•			
	Full Name (Last, First, Middle Initial) of Payee Mosaic			
	Woodio		09 / 26	2012
	Mailing Address 4801 Viewpoint Place		20	20.2
		Amoun	nt	
	City State Zip Code			90.00
	Cheverly MD 20781	Transac	ction ID : D453740	00.00
	Purpose of Expenditure Category/	Office Sough		State:
	Fliers Type 004		Senate	District: 00
	Name of Federal Candidate Supported or Opposed by Expenditure:	-	President	
	Willard Mitt Romney	Check One:	Support	X Oppose
		Disbursemen	nt For: Primary	✓ General
	Calendar Year-To-Date Per Election for Office Sought 422579.38	2012	her (specify)	Goriolai
	Tell Clines Cought		lier (specify)	
	(a) SUBTOTAL of Itemized Independent Expenditures	· •		135.00
			,	
	(b) SUBTOTAL of Unitemized Independent Expenditures	. •		
	(c) TOTAL Independent Expenditures			
			7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political				
party committee) any political party committee or its agent.				
	Ms. Elizabeth H Shuler [Electronically Filed] Date	M M /		1 Y Y Y A O
	Signature Date	9 09	28 20	12
	-			

SCHEDULE E)	PAGE 2 OF 12 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full) FEC IDENTIFICATION NUMBER ▼		
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee		
Mosaic	Date	
	09 26 2012	
Mailing Address 4801 Viewpoint Place		
	Amount	
City State Zip Code	90.00	
	Transaction ID : D453741	
Fliers Category/ 004	e Sought: House State:	
Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	Y President	
Barack Obama Chec	k One: Support Oppose	
Calendar Year-To-Date Per Election	ursement For: Primary 🔀 General	
for Office Sought	Other (specify)	
Full Name (Lost First Middle Initial) of Payer		
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	Date	
	09 / 26 / Y Y Y Y Y Y Y	
Mailing Address 11720 Beltsville Drive #700		
	Amount	
City State Zip Code	321.82	
Beltsville MD 20705	Transaction ID : D453742	
	e Sought: House State: WI	
In Kind Staff Type 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ————	
TOMMY G THOMPSON Chec	k One: Support Oppose	
Colondar Veer To Pete Per Fleeties	ursement For: Primary X General	
Calendar Year-To-Date Per Election 65279.57 2012	Other (specify)	
	Cuter (openity)	
(a) SUBTOTAL of Itemized Independent Expenditures	411.82	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
	7 7	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler	M / D D / Y Y Y Y Y	
Signature [Electronically Filed] Date	28 2012	

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES (SCHEDULE E)

SCHEDULE E)	PAGE 3 OF 12 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full) FEC IDENTIFICATION NUMBER ▼		
Workers' Voice	C C00484287	
	0 00000	
Check If 24-hour report X 48-hour report New report Amends report file	ed on Man / Dab / Yayayay	
Full Name (Last, First, Middle Initial) of Payee	Date	
AFT Solidarity 527	M M / D D / Y Y Y Y	
Mailing Address 555 New Jersey Ave. N.W.	09 26 2012	
555 New Jersey Ave. N.W.	Amount	
City State Zip Code	100.00	
Washington DC 20001	102.30 Transaction ID : D453743	
	rice Sought: House State: WI	
In Kind Staff 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TOMMY G THOMPSON Ch	eck One: Support Oppose	
Calendar Year-To-Date Per Election	sbursement For: Primary General	
for Office Sought 65279.57 2012	Other (specify)	
Full Name (Last, First, Middle Initial) of Payee	Date	
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION	M = M / D = D / Y = Y = Y	
Mailing Address 100 Indiana Avenue, N.W.		
Too mulana Avenue, N. W.	Amount	
City State Zip Code	045.70	
Washington DC 20001	815.70 Transaction ID : D453744	
	fice Sought: House State: WI	
In Kind Staff 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
TOMMY G THOMPSON	eck One: Support Oppose	
	sbursement For: Primary General	
for Office Sought 65279.57 201	Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	918.00	
	7 7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures		
	7 7	
(c) TOTAL Independent Expenditures		
	7 7 -	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert		
with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political		
party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler	/ M / D D / Y Y Y Y Y	
[Electronically Filed] Date	09 28 2012	
- Organization		

SCHEDULE E)	PAGE 4 OF 12 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report filed on	M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527		
Mailing Address 555 New Jersey Ave. N.W.	09 / 26 / Y 2012	
	nount	
City State Zip Code Washington DC 20001	102.30 nsaction ID : D453745	
Purpose of Expenditure In Kind Staff Category/ Type 001	_	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Barack Obama Check C		
Calendar Year-To-Date Per Election for Office Sought 422579.38 Disburse 2012	ement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee	onte	
Mailing Address 11720 Beltsville Drive #700	nount	
City State Zip Code		
Beltsville MD 20705	880.53	
Office Sc	unsaction ID : D453746 ought: House State:	
In Kind Staff Type 001	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama Check C		
Calendar Year-To-Date Per Election for Office Sought Disburse 2012	ement For: Primary General Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	982.83	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date 09	/ D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Signature		

SCHEDULE E)	PAGE 5 OF 12 FOR SE OF FORM 24/48		
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼		
Workers' Voice	C C00484287		
Check If 24-hour report X 48-hour report Amends report filed on			
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address 100 Indiana Avenue N.W.	e 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
100 maint / vondo, 14.vv.	ount		
City State Zip Code Washington DC 20001	1075.25 saction ID : D453747		
Purpose of Expenditure In Kind Staff Category/ Type Office Society Office S	ught: House State: Senate District: 00		
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama Check Or	President Support Oppose		
Calendar Year-To-Date Per Election for Office Sought Disbursen 2012	nent For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527	e 09 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y		
Mailing Address 555 New Jersey Ave. N.W.	ount		
	102.30 saction ID : D453748		
Purpose of Expenditure In Kind Staff Category/ Type Office Soil	ught: House State: WI Senate District: 00 President		
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN Check Or			
Calendar Year-To-Date Per Election for Office Sought 5 65279.57 Disbursen 2012	nent For: Primary General Other (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures	1177.55		
(b) SUBTOTAL of Unitemized Independent Expenditures			
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Ms. Elizabeth H Shuler [Electronically Filed] Date 09	28 2012		

	FOR SE OF FORM 24/48		
NAME OF COMMITTE (In Full)	C IDENTIFICATION NUMBER ▼		
Workers' Voice			
Check If 24-hour report X 48-hour report New report Amends report filed on	/ D = D / Y = Y = Y		
Full Name (Last, First, Middle Initial) of Payee Plasterers' Cement Masons' & Shop Hands Political Action Committee			
Mailing Address 11720 Beltsville Drive #700 Amount	26 2012		
City State Zip Code Beltsville MD 20705	321.82		
Purpose of Expenditure In Kind Staff Category/ Type 001 Office Sought:	House State: WI Senate District: 00		
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN Check One:	President Support Oppose		
Calendar Year-To-Date Per Election for Office Sought Disbursement Fo	or: Primary General (specify)		
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION Mailing Address, 1991, ii. 1	26 / Y 2012		
Mailing Address 100 Indiana Avenue, N.W. Amount			
	1075.25 n ID : D453750		
Purpose of Expenditure In Kind Staff Category/ Type O01	House State: Senate District: 00 President		
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Check One:	Support Oppose		
Calendar Year-To-Date Per Election for Office Sought Disbursement For Other	or: Primary General (specify)		
(a) SUBTOTAL of Itemized Independent Expenditures			
(b) SUBTOTAL of Unitemized Independent Expenditures	7		
(c) TOTAL Independent Expenditures	7		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Ms. Elizabeth H Shuler [Electronically Filed] Date 09 2	2012 y y y y		

(SCHEDULE E)	PAGE 7 OF 12 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	i filed on	
Full Name (Last, First, Middle Initial) of Payee		
Plasterers' Cement Masons' & Shop Hands Political Action Committee	Date	
Mailing Address 11720 Beltsville Drive #700	09	
City State Zip Code	7 tillount	
Beltsville MD 20705	880.53 Transaction ID : D453751	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ———	
Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) of Payee AFT Solidarity 527	Date 09 26 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
Mailing Address 555 New Jersey Ave. N.W.	Amount	
City, Ctota 7in Code	Allouit	
City State Zip Code Washington DC 20001	102.30 Transaction ID : D453752	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ————	
Willard Mitt Romney	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures	982.83	
(a) COSTOTAL OF NOTINEOU HOOPOTHOOK EXPONDING	7 7 7	
(b) SUBTOTAL of Unitemized Independent Expenditures	>	
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	09 28 2012	
Signature	25 2512	

SCHEDULE E)	PAGE 8 OF 12 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed on	T = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee Extras, Inc. Date	
Mailing Address 151 East Lost Toritos	09 26 2012
Amou	Int
City State Zip Code Weslaco TX 78596 Transa	1778.70 ction ID : D453761
Purpose of Expenditure Canvassers Category/ Type 001 Office Soug	ht: House State: NV Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: DEAN HELLER Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought 32797.17 Disbursement 2012	nt For: Primary General
Full Name (Last, First, Middle Initial) of Payee Extras, Inc. Date	M M / D D / Y Y Y Y
Mailing Address 151 East Lost Toritos Amou	09 26 2012
	iiit
City State Zip Code Weslaco TX 78596 Transa	1778.70 action ID : D453763
Purpose of Expenditure Canvassers Category/ Type 001 Office Soug	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Check One:	President Support Oppose
Calendar Year-To-Date Per Election for Office Sought 422579.38 Disburseme 2012	nt For: Primary General ther (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	3557.40
(b) SUBTOTAL of Unitemized Independent Expenditures	7 1 7 1 7 1
(c) TOTAL Independent Expenditures	7
Under penalty of perjury I certify that the independent expenditures reported herein were not made in with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 09	28 2012
Signature	

(SCHEDULE E)	PAGE 9 OF 12 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	ort filed on	
Full Name (Last, First, Middle Initial) of Payee Mosaic	Date	
Mailing Address 4801 Viewpoint Place	M 09 / 26 / 2012 Amount	
City State Zip Code Cheverly MD 20781	45.00	
Purpose of Expenditure Fliers Category/ Type 004	Office Sought: House State: OH Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure: Sherrod Brown	President Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATIO Mailing Address 100 Indiana Avenue, N.W.	Date 09 Date	
	Amount	
City State Zip Code Washington DC 20001	815.70 Transaction ID : D453753	
Purpose of Expenditure In Kind Staff Category/ Type 001	Office Sought: House State: WI Senate District: 00 President	
Name of Federal Candidate Supported or Opposed by Expenditure: TAMMY BALDWIN	Check One: Support Oppose	
Calendar Year-To-Date Per Election for Office Sought	Disbursement For: Primary General 2012 Other (specify)	
(a) SUBTOTAL of Itemized Independent Expenditures		
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler [Electronically Filed] Date	9 09 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	

SCHEDULE E)	PAGE 10 OF 12 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	
AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	09 26 2012 Amount
City Ctata Zin Code	Alliount
City State Zip Code Washington DC 20006	46.58 Transaction ID : D453754
	Sonate State:
	President District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Barack Obama Chec	k One: Support Oppose
Calendar Year-To-Date Per Election Disbut 2012	ursement For: Primary General Other (specify)
Full Name (Look First Middle Initial) of Davis	
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	09 26 2012
maining reacces 815 - Tour Street, NVV	Amount
City State Zip Code	21.73
Washington DC 20006	Transaction ID : D453755
	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure:	President
	k One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbu 2012	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	68.31
(a) SOBTOTAL OF HOMEZON INDEPENDENT EXPONDITURES	00.31
(b) SUBTOTAL of Unitemized Independent Expenditures	7 7 7
(c) TOTAL Independent Expenditures	1 1 7 1 1 7 1 1 7 1
Under penalty of perjury I certify that the independent expenditures reported herein were not ma with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 09	M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Signature	

SCHEDULE E)	PAGE 11 OF 12 FOR SE OF FORM 24/48
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼
Workers' Voice	C C00484287
Check If 24-hour report X 48-hour report New report Amends report filed	on M = M / D = D / Y = Y = Y
Full Name (Last, First, Middle Initial) of Payee	_
AFL-CIÒ	Date
Mailing Address 815 - 16th Street, NW	09 26 2012 Amount
City. Clade 7in Code	Amount
City State Zip Code Washington DC 20006	46.58 Transaction ID : D453757
Purpose of Expenditure Walk Packets Category/ Odd	e Sought: House State:
Туре	Senate District: 00 President
Name of Federal Candidate Supported or Opposed by Expenditure: Willard Mitt Romney Chec	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought Disbute 2012	ursement For: Primary General Other (specify)
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date
Mailing Address 815 - 16th Street, NW	09 26 2012
	Amount
City State Zip Code Washington DC 20006	24.85
0,50	Transaction ID : D453758 e Sought: House State: FL
Walk Packets Category/ Type 004	Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditure: Bill Nelson Check	ck One: Support Oppose
Calendar Year-To-Date Per Election for Office Sought T4989.80	ursement For: Primary General Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures	71.43
(b) SUBTOTAL of Unitemized Independent Expenditures	
	7 7 7
(c) TOTAL Independent Expenditures	
Under penalty of perjury I certify that the independent expenditures reported herein were not may with, or at the request or suggestion of, any candidate or authorized committee or agent of either party committee) any political party committee or its agent.	
Ms. Elizabeth H Shuler [Electronically Filed] Date 09	9 28 2012
Signature	

(SCHEDULE E)	PAGE 12 OF 12 FOR SE OF FORM 24/48	
NAME OF COMMITTE (In Full)	FEC IDENTIFICATION NUMBER ▼	
Workers' Voice	C C00484287	
Check If 24-hour report X 48-hour report New report Amends report	filed on M = M / D = D / Y = Y = Y	
Full Name (Last, First, Middle Initial) of Payee	5.	
AFL-CIO	Date	
Mailing Address 815 - 16th Street, NW	09 / 26 / 2012	
	Amount	
City State Zip Code	21.73	
Washington DC 20006	Transaction ID : D453759	
Purpose of Expenditure Walk Packets Category/ Type 004	Office Sought: House State: WI Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President ————	
	Check One: Support Oppose	
Laichuai real-10-Daic Fei Election	Disbursement For: Primary General O12 Other (specify)	
Full Name (Last, First, Middle Initial) of Payee AFL-CIO	Date	
Mailing Address 815 - 16th Street, NW	09 26 2012	
	Amount	
City State Zip Code		
Washington DC 20006	24.85	
Purpose of Expenditure Category/	Transaction ID : D453760 Office Sought: House State: FL	
Walk Packets Type 004	Senate District: 00	
Name of Federal Candidate Supported or Opposed by Expenditure:	President	
	Check One: Support Oppose	
	Disbursement For: Primary General 012 Other (specify)	
1.9.1 3.11.3		
(a) SUBTOTAL of Itemized Independent Expenditures	46.58	
(b) SUBTOTAL of Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures	10609.52	
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.		
Ms. Elizabeth H Shuler	M = M / D = D / Y = Y = Y	
[Electronically Filed] Date Signature	09 28 2012	
•		